

**● PRINTER RUSH ●**  
(PTO ASSISTANCE)

Application : <u>10/780858</u>	Examiner : <u>Le, Thao</u>	GAU : <u>28/8</u>
From: <u>A.S.C.</u>	Location: <u>ID2</u> FMF FDC	Date: _____

Tracking #: 6078932 Week Date: 2/21/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> <u>CLM</u>	<u>02-18-2004</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Improper Dependency:

A) Original Claims 6 and 7 depend upon canceled original claim 5

B) Original Claim 32 depends upon canceled original claim 31.

Please resolve.

Thank you,  
ASC

[XRUSH] RESPONSE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INITIALS:**

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
REV 10/04